



Docket No. 55672-AA-PCT-US/JPW/AJM/BJA

JPW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Gloria C. Li et al.

Serial No. : 10/712,642

Examiner: Jane Zara

Filed : November 12, 2003

Group Art Unit: 1635

For : USES OF DNA-PK

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Date: October 13, 2006

Sir:

Transmitted herewith is an amendment to the above-identified application.

- Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.
- A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.
- No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE		FEE	
				Small Entity	Other Entity	Small Entity	Other Entity
Total Claims	<u>14</u> -	* <u>14</u> =	*** <u>0</u> x	\$25	\$50	=	x
Independent Claims	<u>4</u> -	** <u>4</u> =	*** <u>0</u> x	\$100	\$200	=	x
Multiple Dependent Claim(s) Presented For First Time	Yes <u>x</u> No			\$180	\$360	=	x
				TOTAL ADDITIONAL FEE			
							\$ 0

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.
 * If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
 ** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
 *** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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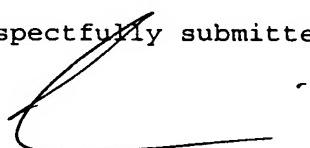
The following are also enclosed:

- One additional copy of this Amendment Transmittal Letter
 Return Receipt Postcard
 An Information Disclosure Statement, including Form PTO-1449
(Copies of citations included: Yes _____ No _____
and a fee of \$ _____ included)
 A Petition for an Extension of Time, including a fee of
\$ 510.00 for a Petition for 3 Month(s) Extension of Time
 Other (identify): _____

THE TOTAL FEE DUE IS \$ 510.00.

- A check in the amount of \$ 510.00 is enclosed.
 Please charge Deposit Account No. _____ in the amount of
\$ _____.
 The Commissioner is hereby authorized to charge any additional fees
required or credit any overpayment to Deposit Account No. 03-3125
as follows:
 Fees under 37 C.F.R. §1.16 for the presentation of extra claims
 Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,


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I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:
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co/13/06
Date
Alan J. Morrison
Reg. No. 37,399